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Deliver to: David Robert Vincent, USPTO Art Group: 2661
 Facsimile No.: 703.872.9306 Date: April 26, 2005
 From: James Henry, Reg. No. 41,064
 Our Docket No.: 81862P239 Number of pages 26 including this sheet.
 Application No.: 09/751,792 Filing Date: 12/29/2000
 Docket Due Date(s): 4/26/2005

Enclosed are the following documents:

- Amendment: (.22 pgs)
 Appeal Brief (pgs)
 Application: (pgs) w/cover & abstract
 Assignment & Cover Sheet (pgs)
 Certificate of Facsimile
 Continued Prosecution Application (CPA)
 Declaration & POA (pgs)
 Drawings: sheets, figures
 Extension of Time:
 Fee Transmittal (in duplicate)
 IDS & PTO/SB/08 (pgs)
 Other

- Issue Fee Transmittal
 Notice of Appeal
 Petition for:
 Request for Continued Examination (RCE)
 Reply Brief (pgs)
 Request & Certification Under 35 USC 122(b)(2)(B)(i)
 Request to Rescind Previous Nonpublication Request
 Response to Notice of Missing Parts & Formalities Letter
 Response to Written Opinion (pgs)
 Terminal Disclaimer
 Transmittal of Publication Fee Duo
 Transmittal Letter

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.81)

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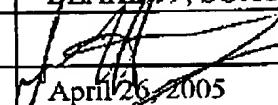

Pat Sullivan 4/26/2005
Pat Sullivan Date

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application No.	09/751,792
		Filing Date	December 29, 2000
		First Named Inventor	Kent Wendorf
		Art Unit	2661
		Examiner Name	David Robert Vincent
Total Number of Pages in This Submission	26	Attorney Docket Number	81862P239

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53			
<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)			
<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;">Facsimile Transmittal Sheet</div>			
Remarks			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	James Henry, Reg. No. 41,064 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	April 26, 2005

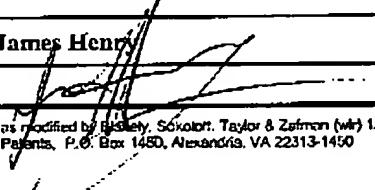
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Signature			
	Date	April 26, 2005	

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wir) 06/04/2004.
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FEE TRANSMITTAL for FY 2005		Complete If Known																																																																																	
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METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) <input type="checkbox"/> Credit any overpayments under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.																																																																																			
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padding: 2px;">2253 510</td> <td style="text-align: left; padding: 2px;">Extension for reply within third month</td> <td style="text-align: center; padding: 2px;"></td> </tr> <tr> <td style="text-align: left; padding: 2px;">1254 1,590</td> <td style="text-align: left; padding: 2px;">2254 795</td> <td style="text-align: left; padding: 2px;">Extension for reply within fourth month</td> <td style="text-align: center; padding: 2px;"></td> </tr> <tr> <td style="text-align: left; padding: 2px;">1255 2,160</td> <td style="text-align: left; padding: 2px;">2255 1,080</td> <td style="text-align: left; padding: 2px;">Extension for reply within fifth month</td> <td style="text-align: center; padding: 2px;"></td> </tr> <tr> <td style="text-align: left; padding: 2px;">1401 500</td> <td style="text-align: left; padding: 2px;">2401 250</td> <td style="text-align: left; padding: 2px;">Notice of Appeal</td> <td style="text-align: center; padding: 2px;"></td> </tr> <tr> <td style="text-align: left; padding: 2px;">1402 500</td> <td style="text-align: left; 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SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	James Henry	Registration No. (Attorney/Agent)	41,064	Telephone
Signature			Date	04/26/05

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SUBMITTED BY																																																																																																													
Name (Print/Type)	James Henry		Registration No. (Attorney/Agent)	41,064																																																																																																									
Signature			Telephone	(714) 557-3800																																																																																																									
			Date	04/26/05																																																																																																									

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wir) 12/15/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Appl. No. 09/751,792

Amdt. dated 04/16/2005

Reply to Office action of 01/26/2005

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CENTRAL FAX CENTER****APR 26 2005****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appl. No.	:	09/751,792	Confirmation No. 5312
Applicant	:	Kent Wendorf	
Filed	:	12/29/2000	
TC/A.U.	:	2661	
Examiner	:	VINCENT, DAVID ROBERT	
Docket No.	:	81862.P239	
Customer No.	:	8791	

Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action of 01/26/2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 19 of this paper.